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PTO/SB/82 (01-05)

Approved for use through 12/31/2003. OMB 0551-0036

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Application Number	10/759,081
Filing Date	01/20/2004
First Named Inventor	Chou H. Li
Art Unit	2815
Examiner Name	KRAIG, WILLIAM
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **Reg. No. 24,925**

☒ Please change the correspondence address for the above-identified application to:

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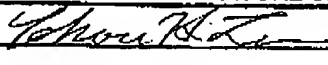
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Chou H. Li		
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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